POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*Bd*	*2:31*	
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	*Le*	*233*	*11/69*
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim column 1 (Final / Original / Date):

Original	Mark
1	✔
2	✔
3	✔
4	✔
5	✔
6	✔
7	✔
8	✔
9	✔
10	✔
11	✔
12	✔
13	✔
(14)	✔
15	✔
16	✔
17	✔
18	✔
19	✔
20	✔
21	✔
22	✔
(23)	N
24	N
25	N
(26)	✔
27	✔
28	
29	
30–50	

Claim column 2: 51–100 (blank)

Claim column 3: 101–150 (blank)

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)